FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

Principal Place of Business

P95000027921 (2) **DOCUMENT #**

Mailing Address



9650 SANDALFOOT BLVD #210 BOCA RATON FL 33428			9850 SANDALFOOT BLVD.: #210 BOCA RATON FL 33428				
					3. Date Incorporated or Qualified 04/05/1995	3a. Date of Last Report	
2. Principal Pla	ce of Business	2a. Mailing Addr	2a. Mailing Address		4. FET Number 3308?	Applied For Not Applicable	
Suite, Apt. #	, etc.		Suite, Apt. #, otc		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	<u> </u>		6. Election Campaign Financing	\$5.00 May Be	
23 Country		[28]	Zip Country		Trust Fund Contribution	Trust Fund Contribution Added to Fees 8. This corporation has lability for intangible tax under s 199.032,	
Zip 24	Country 25	29	30			s No	
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New	Registered Agent	
				81 Name	3		
MILLER,					eet Address (P.O. Box Number is Not Acceptable)		
	NDALFOOT BLVD., #210 ATON FL 33428		-	83			
2001110			-	84 City		85 Zip Gode	
						FL	
or registere	o the provisions of Sections 607.0 ed agent, or both, in the State of I in, and accept the obligations of S	Florida. Such change was	authorized by the c	ze named orporation	corporation submits this statement for the p is board of directors. I hereby accept the ap	urbose of changing its registered office pointment as registered agent. I am	
SIGNATURE _	Signature: typed or printed hame of registered	about and title disconnection	NOTE Boustered	Agerit signatur	energared when renistating	DATE	
12.		AND DIRECTORS	13.		,	FICERS AND DIRECTORS IN 12	
TITLE	D	C) DEL	ETE 1:TI	'LF		Change Addition	
NAME	KOKINOS, GEORGE L		1.2 NA	ME			
STREET ADDRESS	9850 SANDALFOOT BLVD)., # 210		HEET ADDRES	3		
CITY - ST - ZIP	BOCA RATON FL 33428	ET DEL		Y-ST ZIP		Change Addition	
TITLE	D AMEDING SANDDA	☐ DEL	ETE 2 1 TI 2 2 NA				
NAME erocci apposes	CATA CAMPAL FOOT DIAM FOLD			me Reet Addres:			
STREET ADDRESS CITY - ST - ZIP	BOCA RATON FL 33428	., #210		r - \$1 - ZiP			
Trile	50011111101112	DEL				. Change Addition	
NAME			3 2 NA	ME			
STREET ADDRESS			3 3 S	REET ADDRES	s		
CITY-ST-ZiP				Y - ST - 71F			
THILE		☐ DEL				Change Addition	
NAME			4.2 NA		j		
STREET ADDRESS				reet addres			
CITY-ST-2IP TITLE		DEL		TY-ST-ZIP		Change Addition	
NAME			5.2 NA			C susualis C section	
STREET ADDRESS				REET ADDRES	s		
CITY-ST-ZIP				17-85-71P			
TITLE		DEL				Change Addition	
NAME			6 2 NA	ME			
STREET ADDRESS			63 ST	REET ADDRES	s		
CITY-ST-ZIP				TY - ST - ZIP	_L		
1/ Ldo bereb	v certify that the information suon	lied with this filma is volun	tarily furnished and	noes not c	halfy for the exemption stated in Section 11	9.07(3)(k) Florida Statutes Lifurther	

roo hereby certify that the information supplied with this ling is voluntarly formise and does not equity for the exemption scaled in section 119.07(b) Florida Statutes, further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or I rustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 13 if changed, or on an attriction and address.

SIGNATURE:

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/96 407-488-9658

CR2E034 (12/95)